FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. EAGLE PAC PO BOX 6312 ADDRESS (number and street) (Check if address is changed) LIBERTYVILLE 60048 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PAUL@PDSCOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address MGOODE@PDSCOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2016 C00572123 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. PAUL KILGORE Type or Print Name of Treasurer PAUL KILGORE [Electronically Filed] 09 07 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

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Local 202-694-1100